PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmisting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless corrected b maintenance fee notification	elow or directed oth	erwise in Block 1, by (a) specifying a new cor	respondence addr	ess; and/or (b) indicating a sepa	rate "FEE ADDRESS" for
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							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	380	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/524,202 62/10/2005			Christoph Adami	12810.00020-US		9934	
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nonprovisional	NO	\$1440	\$300	\$0 		\$1740	61/22/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS				
PUTTLITZ, KARL J		1621	562-609000		94.1		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) The printing on the patent front page, list (3) Connoily Boye Lodge and Hutz (4) The page of the patent front page, list (5) Connoily Boye Lodge and Hutz				
3. ASSIGNEE NAME AND							
PLEASE NOTE: Unless recordation as set forth in	an assignee is identi 37 CFR 3.11. Comp	fied below, no assigned letion of this form is NO	data will appear on the T a substitute for filing	e patent. If an ass an assignment.	signee is ide	ntified helow, the de	ocument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
BASF Aktiens	Ludwigshafen, Germany						
Flease check the appropriate	assignee category or	categories (will not be pr	rinted on the patent):	🗆 Individual 🏾	Corporation	or other private gro	rup entity Government
4a. The following fee(s) are:	o. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.						
2 Publication Fee (No s	Payment by credit eard. Form PTO-2038 is attached.						
Advance Order - # of	The Director is hereby authorized to charge the required (eg(s), any deficiency, or credit any overpayment, to Deposit Account Number 22-0185 (enclose an extra copy of this form).						
5. Change in Entity Status	(from status indicated	above)			-		
a. Applicant claims S			D b. Applicant is no l				
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Authorized Signature		Date	.,,	December 3	, 2007		
Typed or printed name_		Registration No. 24,852					
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